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**UNITED STATES DISTRICT COURT  
 CENTRAL DISTRICT OF CALIFORNIA**

JAMES R. GLIDEWELL DENTAL  
 CERAMICS, INC. dba GLIDEWELL  
 LABORATORIES

PLAINTIFF(S)

CASE NUMBER

SACV11-01309-DOC(ANx)

v.

KEATING DENTAL ARTS, INC.

DEFENDANT(S).

**NOTICE OF CHANGE OF  
 ATTORNEY INFORMATION**

**The following information must be provided:**

I, Darrell L. Olson, 77,633, darrell.olson@knobbe.com  
Name CA Bar ID Number E-mail Address

☒ am counsel of record or ☐ out-of-state attorney in the above-entitled cause of action for the following party(s)

Defendant/Counter-Plaintiff Keating Dental Arts, Inc.

and am requesting the following change(s):

THIS SECTION MUST BE COMPLETED IF YOUR E-MAIL ADDRESS IS TO BE ADDED.

I ☒ consent ☐ do not consent to receive service of documents by electronic means in accordance with Fed. R. Civ. P. 5(b)(2)(E) and 77 (d), and Fed. R. Crim. P. 49(b)-(d).

**SELECT THE CATEGORY AND COMPLETE THE INFORMATION REQUESTED:**

☒ TO UPDATE NAME OR FIRM INFORMATION:

☒ I am providing the following new information pursuant to Local Rule 83-2.7 to be updated on the above-entitled cause of action.

PROVIDE ONLY THE INFORMATION THAT HAS CHANGED

Attorney Name changed to \_\_\_\_\_

New Firm/Government Agency Name \_\_\_\_\_

New Address \_\_\_\_\_

New Telephone Number \_\_\_\_\_ New Facsimile Number \_\_\_\_\_

New E-mail address darrell.olson@knobbe.com

☒ TO BE ADDED AS COUNSEL OF RECORD: CHECK ONE BOX

☐ I am counsel of record in the above-entitled action and should have been added to the docket in this case. I made my first appearance in this case on \_\_\_\_\_

☒ This constitutes my Notice of Appearance to appear as counsel of record for the party(s) listed above in the above-entitled action.

IF YOUR FIRM IS **NOT** ALREADY PART OF THIS ACTION AND ARE ASSOCIATING IN AS COUNSEL OF RECORD A NOTICE OF ASSOCIATION SHOULD BE FILED. IF YOU ARE GOING TO APPEAR PRO HAC VICE, A SEPARATE APPLICATION OF NON-RESIDENT ATTORNEY TO APPEAR IN A SPECIFIC CASE, G-64 MUST BE FILED.

Attorney Name \_\_\_\_\_ CA State Bar Number \_\_\_\_\_  
 Firm/Government Agency Name \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone Number \_\_\_\_\_ Facsimile Number \_\_\_\_\_  
 New E-mail address \_\_\_\_\_

- ☐ TO BE REMOVED FROM THE CASE: \*\*
- ☐ I am ☐ the aforementioned attorney from my firm is no longer counsel of record in the above-entitled cause of action.

CHECK ONE BOX

- ☐ The order relieving me/the aforementioned attorney from my firm was filed on: \_\_\_\_\_.
- ☐ There is/are other attorney(s) from the undersigned attorney's law firm/government agency who are counsel of record in this case.
- ☐ I am ☐ the aforementioned attorney is no longer with the firm/government agency representing the above-named party in this action. There is/are attorney(s) from my former firm/government agency who are currently counsel of record in this case.

**\*\* This form *cannot* be used as a substitution of attorney form. For substitution of attorney procedures please refer to Local Rule 83-2.9 and form G-01, *Request for Substitution of Attorney* and G-01 ORDER, *Order on Request for Substitution of Attorney*. At least one member of the firm/government agency MUST continue to represent and receive service for the parties indicated above in this action.**

Date: 12-19-2012

/s/ Darrell L. Olson

*Signature of Attorney of Record / Attorney for the Firm*

**PLEASE NOTE: CM/ECF users must update their account information in the system pursuant to the General Order authorizing electronic filing, in addition to filing this Notice of Change of Attorney Information. A separate Notice must be filed in every pending case pursuant to Local Rule 83-2.7.**